PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

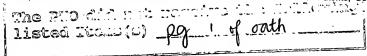
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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. First Inventor THAT With Reversible Crown and Detachable Reversible Dual Visor

(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.				
APPLICATION ELEMENTS	Assistant Commissioner for Potento				
See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Box Patent Application Washington, DC 20231				
Fee Transmittal Form (e.g., PTO/SB/17)	7. CD-ROM or CD-R in duplicate, large table or				
(Submit an original and a duplicate for fee processing) Applicant claims small entity status.	Computer Program (Appendix)				
See 37 CFR 1.27.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
3. Specification [Total Pages [3]]	a. Computer Readable Form (CRF)				
- Descriptive title of the invention - Cross Reference to Related Applications	b. Specification Sequence Listing on:				
- Statement Regarding Fed sponsored R & D	i. CD-ROM or CD-R (2 copies); or				
Reference to sequence listing, a table, or a computer program listing appendix	ii. paper				
Background of the Invention Brief Summary of the Invention	c. Statements verifying identity of above copies				
Brief Description of the Drawings (if filed) Detailed Description	ACCOMPANYING APPLICATION PARTS				
- Claim(s)	9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of				
- Abstract of the Disclosure	10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney				
4. Drawing(s) (35 U.S.C. 113) [Total Sheets]	11. English Translation Document (if applicable)				
5. Oath or Declaration [Total Pages]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations				
a. Newly executed (original or copy)	13. Preliminary Amendment				
b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
i. DELETION OF INVENTOR(S)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR	Nonsylliantian Particular 35 U.S.C. 400				
1.63(d)(2) and 1.33(b).	(b)(2)(B)(i). Applicant must attach form PTO/SB/35				
6. Application Data Sheet. See 37 CFR 1.76	or its equivalent.				
18. If a CONTINUING APPLICATION, check appropriate box, and supp					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:					
Continuation Divisional Continuation-in-part (CIP)	of prior application No.: 09, 836, 917				
Prior application information: Examiner K. INORAN Group Art Unit: 3765 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under					
Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
19. CORRESPONDENCE ADDRESS					
Customer Number or Bar Code Label	or Correspondence address below				
Name MONA HALL M	1cKenzie				
414 BRANCH DRIV					
Address	10				
city SILVER SPRING	State MD Zip Code 20901				
1400	ephone 301-592-8332 Fax				
	100. 0 12 0332				
Name (PrintlType) MONA HALL MCKenzie Registration No. (AttorneylAgent)					
Signature Mone Stall McK	enue Date 3/6/03				

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PTO/SB/17 (01-03)
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FEE IRANSMITTAL		Compi te il Known						
		Application Number						
for FY 2003		Filing Date				1/6/2003,		
Effective 01/01/2003. Patent fees are subject to annual revision.		First Named Inventor			ntor H7	YZEL L. HALL		
Applicant claims small entity status. See 37 CFR 1.27		Exan	niner N	lame	K	MORAN	•	
0-10)		Art U	nit			3705		
TOTAL AMOUNT OF PAYMENT (\$) 375	Attorney Docket No. 194366							
METHOD OF PAYMENT (check all that apply)	reck all that apply) FEE CALCULATION (continued)							
Check Credit card Money Other None 3 ADDITIONAL FEES								
Deposit Account:	Large Entity Small Entity							
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fe	e Description		
Account Number	1051		2051		Surcharge - I	late filing fee or oath	Fee Paid	
Deposit Account	. 1052		2052		-	late provisional filing fee or	 	
Name					cover sheet			
The Commissioner is authorized to: (check all that apply)	1053	130 2,520	1053 1812		Non-English		├── ─ 	
Charge fee(s) indicated below Credit any overpayments	1804		1804			quest for ex parte reexamination publication of SIR prior to	 	
Charge any additional fee(s) during the pendency of this application	. 1004	. 320	1004		Examiner act	tion		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting processing processing the second	publication of SIR after tion		
FEE CALCULATION	1251	110	2251	55	Extension fo	r reply within first month		
1. BASIC FILING FEE	1252	410	2252	205	Extension fo	r reply within second month	I	
arge Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid	1253	930	2253	465	Extension fo	r reply within third month		
Code (\$) Code (\$)	1254	1,450	2254	725		r reply within fourth month		
1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension fo	r reply within fifth month		
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Ap	peal		
1003 520- 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief	in support of an appeal		
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for o	oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to ins	stitute a public use proceeding		
SUBTOTAL (1) (\$) 375	1452	110	2452			vive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453			vive - unintentional		
Fee from Ext <u>ra Claims below</u> Fee Paid		1,300	2501			ee (or reissue)		
Total Claims 6 -20** = X	1502 1503	470 630	2502		Design issue			
Independent Claims -3** = X	1460	130	2503 1460		Plant issue for		[
Multiple Dependent	1807	50	1807			he Commissioner		
Large Entity Small Entity	1806	180				ee under 37 CFR 1.17(q)		
Fee Fee Fee Fee Description Code (\$)			1806			of Information Disclosure Stmt ich patent assignment per		
1202 18 2202 9 Claims in excess of 20	8021	40	8021		property (time	es number of properties)		
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a subm (37 CFR 1.12	nission after final rejection 29(a))		
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 ** Reissue independent claims	1810	750	2810	375	For each add	litional invention to be 7 CFR 1.129(b))		
over original patent	1801	750	2801			Continued Examination (RCE)	. 	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for	expedited examination		
Other for (positiv)								
**or number previously paid, if greater; For Reissues, see above								
SUBMITTED BY (Complete (if applicable)								
Telephone (351) 592 - 8332								
ignature Day all NOK-ENZ		womev//	ident)	<u> </u>		Date 4/6/76	0004	
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PTO/SB/21 (01-03)
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(Application Numb r					
TRANSMITTAL	Filing Date 4/12/2003					
FORM	First Named Inventor					
(to be used for all correspondence after initial t						
	Examiner Name K. MORAN					
	Attorney Docket Number 19,LD/					
Total Number of Pages in This Submission	194366					
ENCLOSURES (Check all that apply)						
Fee Transmittal Form	Drawing(s) After Allowance Communication to Group					
Fee Attached	Licensing-related Papers Appeal Communication to Board of Appeals and Interferences					
Amendment/Reply	Petition Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final	Petition to Convert to a Provisional Application Proprietary Information					
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address Status Letter					
Extension of Time Request	Torminal Disalaimes Other Enclosure(s) (please					
	identity below):					
Express Abandonment Request	Request for Refund					
Information Disclosure Statement	CD, Number of CD(s)					
Certified Copy of Priority Document(s) Remarks						
Response to Missing Parts/ Incomplete Application						
Response to Missing Parts						
under 37 CFR 1.52 or 1.53						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm or Individual	HALL MCKENZIE					
Signature 10 500 NO Keno 10						
Date 4/6/2003						
CERTIFICATE OF TRANSMISSION/MAILING						
hereby certify that this correspondence is being foodimile to accoming to the control of the con						
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:						
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Signature 0 000	Hall Mc Kenzie Pete 4/10/2003					

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